



Overview of Psoriatic Arthritis

Psoriatic arthritis is a progressive inflammatory condition of the joints and the places where tendons and ligaments attach to bones (entheses). It happens when the immune system, for unknown reasons, becomes overactive and creates inflammation, leading to pain and swelling. Most people who develop psoriatic arthritis already have <u>psoriasis</u> (a skin disease) when they are diagnosed, but a small fraction have joint pain before the skin rash.

Symptoms appear in different patterns in different people, which can make the disease hard to diagnose. But it is important to see your doctor soon if joint symptoms arise because early treatment is associated with better outcomes and less damage related to the disease.

There is no cure for psoriatic arthritis, but thanks to a better understanding of the disease, treatments can slow its progression, lessen pain, and protect the joints.

Who Gets Psoriatic Arthritis?

Anyone can get psoriatic arthritis, but it is most common in adults, affecting men and women equally. The large majority of people who get it already have psoriasis, and, on average, psoriatic arthritis develops about 7 to 10 years after the onset of skin symptoms. While it is not yet clear who will develop psoriatic arthritis, obesity and having severe psoriasis appear to be associated with a higher risk of arthritis among people with psoriasis. Sometimes stressful events, trauma to the joints or bones, or infections may trigger the disease.

Symptoms of Psoriatic Arthritis

Symptoms of psoriatic arthritis vary greatly from person to person. They may include:

- Scaly, inflamed patches of skin characteristic of psoriasis, often on the scalp, elbows, or knees.
- Joint stiffness, pain, and swelling of one or more joints. The joints of the spine can be affected as well, leading to stiffness in the neck, lower back, and hips. Joint stiffness is often worse in the morning or after resting.
- Fatigue, or feeling tired often or having a lack of energy.

- Tenderness in entheses, areas where tendons or ligaments attach to bones. The back of the heel and sole of the foot are commonly affected spots.
- Painful, sausage-like swelling of a whole finger or toe.
- Nail changes, such as pitting (tiny dents) or crumbling. Nails can also separate from the nail bed.
- Eye inflammation, especially uveitis, inflammation of the middle layer of the eye. This condition can cause eye pain, redness, and blurry vision, and must be treated promptly to avoid vision loss.
- Inflammatory bowel disease, which causes inflammation in the digestive tract, occurs in some people.

Causes of Psoriatic Arthritis

Psoriatic arthritis is an immune-mediated disease, which means that your immune system overacts and causes problems. Scientists do not fully understand why changes in immune activity happen, but they know that certain factors may trigger your immune system, causing the disease. These factors include:

- Genes: Many people who get psoriatic arthritis have a family history of the disease, and researchers have identified some of the genes involved.
- **Environment:** Factors such as obesity, infection, injury, or stress may trigger the onset of the disease.

Diagnosis of Psoriatic Arthritis

Although there is no definitive test for psoriatic arthritis, your doctor may do the following to diagnose you with the condition:

- Ask if you have a family history of psoriasis or psoriatic arthritis.
- Talk to you about your symptoms and give you a physical exam. Swollen and tender joints, psoriasis skin lesions, and nail changes are telltale signs.
- Examine your skin for signs of psoriasis, if you have never been diagnosed with the condition.
- Take a blood sample to check for other conditions, such as rheumatoid arthritis.
- Order imaging tests such as x-rays, ultrasounds, or magnetic resonance imaging (MRI), which can reveal changes in joints, entheses, or the spine.

Treatment of Psoriatic Arthritis

Treatment of psoriatic arthritis continues to improve, which can give many people relief from symptoms and improve their quality of life. Your treatment plan depends on the pattern of symptoms and their severity. You may need to try different medications to find one that works, or use a combination of them.

Milder forms of the disease may be treated by:

- Over-the-counter anti-inflammatory and pain medications, which can help treat pain and swelling.
- Injections of corticosteroids, strong inflammation-fighting drugs, into the affected joints.
 Because they are potent drugs, your doctor will prescribe the lowest dose possible to achieve the desired benefit.

More persistent or severe disease may be treated by:

- Disease-modifying anti-rheumatic drugs (DMARDs), oral therapies that suppress the immune system on a broad level and help to decrease signs and symptoms of the disease.
- Biologic response modifiers, which target specific immune messages and interrupt the signal, helping to decrease or stop inflammation and prevent future damage.

Who Treats Psoriatic Arthritis?

Health care providers who treat psoriatic arthritis include:

- Rheumatologists, who specialize in arthritis, including psoriatic arthritis, and other diseases of the bones, joints, and muscles.
- Dermatologists, who specialize in conditions of the skin, hair, and nails.
- Physiatrists (rehabilitation specialists) who supervise exercise programs.
- Occupational therapists, who teach ways to protect joints, lessen pain, perform activities of daily living, and conserve energy.
- Physical therapists, who help to improve joint function.
- Primary health care providers, including family doctors, internists, and pediatricians, who
 treat problems as they arise and coordinate care between the different specialized health
 care providers.
- Dietitians, who teach about nutrition and maintaining a healthy weight.

Living With Psoriatic Arthritis

Having psoriatic arthritis can affect your day-to-day life, but there are ways to lessen its impact. In addition to going to your doctor regularly, here are some things you can try to help manage your symptoms:

- If you smoke, work with your doctor to make a plan to quit. Some studies have shown that the more a person smokes, the worse the symptoms tend to be.
- Maintain a healthy weight. This will place less strain on your joints and may help you respond better to medications.
- Try different exercise programs and find the best one for you. Low-impact activities such as walking, cycling, swimming, yoga, or tai chi may be especially helpful. Talk with your doctor before starting any exercise program.
- Protect your joints, such as by pushing open a door with your whole body instead of just your fingers.
- Reach out for support to help cope with the emotional and mental effects of psoriatic arthritis.
 Consider joining a support group or seek counseling, which can help you learn more about coping and living with the disease.

Participating in your care can help build confidence in your ability to perform day-to-day activities, allowing you to lead a full, active, and independent life.

Research Progress Related to Psoriatic Arthritis

The NIAMS supports translational and clinical research at universities and other organizations throughout the country that are studying psoriatic arthritis. Researchers are continuing work to understand what causes the disease, which may help them identify new treatment strategies. Following are some examples of the types of studies that are ongoing.

- Research has already uncovered many of the immune molecules involved in psoriasis and psoriatic arthritis. Investigators are using structural and biochemical methods to engineer inhibitors of these molecules, which may form the basis of new medicines.
- Using bioinformatics methods to mine patient records and gene activity datasets, scientists are seeking to identify new therapeutic targets.
- Scientists do not know why some people with psoriasis get psoriatic arthritis, while others do
 not. They are working to uncover ways to predict which patients will develop psoriatic arthritis
 so that those at risk can be closely monitored and treated if symptoms arise.
- Other researchers are investigating if treating patients who have psoriasis with biologic medications, which act throughout the body, can prevent the onset of psoriatic arthritis.

- Investigators suspect that internal factors besides a person's genes may contribute to getting
 psoriatic arthritis. For example, they are studying the roles played by epigenetics
 (modifications to DNA that turn genes on and off) and the microbiome (the collection of all the
 microbes that inhabit the human body).
- People with psoriatic arthritis have a greater risk of certain diseases and conditions, such as obesity, diabetes, anxiety, depression, and cardiovascular problems. Scientists are seeking ways to decrease these risks.

For More Info

U.S. Food and Drug Administration

Toll free: 888-INFO-FDA (888-463-6332)

Website: https://www.fda.gov

For additional information on specific medications, visit Drugs@FDA at https://www.accessdata.fda.gov/scripts/cder/daf. Drugs@FDA is a searchable catalog of FDA-approved drug products.

Centers for Disease Control and Prevention, National Center for Health Statistics

Website: https://www.cdc.gov/nchs

American College of Rheumatology

Website: https://www.rheumatology.org

Arthritis Foundation

Website: https://www.arthritis.org

National Psoriasis Foundation

Website: https://www.psoriasis.org

Si necesita más información sobre recursos confiables en su idioma o en otro idioma, por favor visite las páginas web que aparecen a continuación o comuníquese con el Centro Nacional de Distribución de Información del NIAMS en NIAMSInfo@mail.nih.gov.

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